

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF PUERTO RICO

Case number (if known) Chapter 7

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

06/22

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name ARVADA CORPORATION

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 66-0863238

4. Debtor's address Principal place of business Mailing address, if different from principal place of business

AVE PINERO 1578
SAN JUAN, PR 00921

Number, Street, City, State & ZIP Code

San Juan

County

PMB 154
295 PALMAS INN WAY STE 130
HUMACAO, PR 00791

P.O. Box, Number, Street, City, State & ZIP Code

Location of principal assets, if different from principal place of business

AVE PINERO 1578 San Juan, PR 00921

Number, Street, City, State & ZIP Code

5. Debtor's website (URL)

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership (excluding LLP)

☐ Other. Specify:

Debtor **ARVADA CORPORATION**
Name

Case number (if known)

7. Describe debtor's business

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- ☒ Chapter 7
- ☐ Chapter 9
- ☐ Chapter 11. Check **all** that apply:

A debtor who is a "small business debtor" must check the first sub-box. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box.

- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11**. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

- ☒ No.
- ☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

Debtor **ARVADA CORPORATION** Case number (if known) _____
Name

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor? ☒ No ☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor Relationship
District Case number, if known

11. Why is the case filed in this district? Check all that apply:
- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention? ☒ No ☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.
- Why does the property need immediate attention? (Check all that apply.)**
- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.
What is the hazard? _____
- ☐ It needs to be physically secured or protected from the weather.
- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
- ☐ Other _____
- Where is the property?** _____
Number, Street, City, State & ZIP Code
- Is the property insured?**
- ☐ No
- ☐ Yes. Insurance agency _____
Contact name _____
Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds Check one:
- ☐ Funds will be available for distribution to unsecured creditors.
- ☒ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors
- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input type="checkbox"/> 50-99 | <input type="checkbox"/> 5001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |

15. Estimated Assets
- | | | |
|--|--|--|
| <input type="checkbox"/> \$0 - \$50,000 | <input type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
| <input checked="" type="checkbox"/> \$50,001 - \$100,000 | <input type="checkbox"/> \$10,000,001 - \$50 million | <input type="checkbox"/> \$1,000,000,001 - \$10 billion |
| <input type="checkbox"/> \$100,001 - \$500,000 | <input type="checkbox"/> \$50,000,001 - \$100 million | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> More than \$50 billion |

16. Estimated liabilities
- | | | |
|---|---|--|
| <input type="checkbox"/> \$0 - \$50,000 | <input type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
|---|---|--|

Debtor

ARVADA CORPORATION

Case number (if known)

Name

☐ \$50,001 - \$100,000

☐ \$10,000,001 - \$50 million

☐ \$1,000,000,001 - \$10 billion

☐ \$100,001 - \$500,000

☐ \$50,000,001 - \$100 million

☐ \$10,000,000,001 - \$50 billion

☒ \$500,001 - \$1 million

☐ \$100,000,001 - \$500 million

☐ More than \$50 billion

Debtor **ARVADA CORPORATION**
Name

Case number (if known)

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **February 9, 2024**
MM / DD / YYYY

X /s/ JOSEPH MAQUEDA CARRION
Signature of authorized representative of debtor

JOSEPH MAQUEDA CARRION
Printed name

Title **President**

18. Signature of attorney

X /s/ JUAN A SANTOS BERRIOS
Signature of attorney for debtor

Date **February 9, 2024**
MM / DD / YYYY

JUAN A SANTOS BERRIOS
Printed name

Santos-Berrios Law Offices, LLC
Firm name

PO Box 9102
Humacao, PR 00792-9102
Number, Street, City, State & ZIP Code

Contact phone **787-285-1001**

Email address **santosberriosbk@gmail.com**

212506 PR
Bar number and State

Fill in this information to identify the case:

Debtor name **ARVADA CORPORATION**

United States Bankruptcy Court for the: **DISTRICT OF PUERTO RICO**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☐ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☐ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☐ *Schedule H: Codebtors* (Official Form 206H)
- ☐ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule* _____
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **February 9, 2024**

X /s/ JOSEPH MAQUEDA CARRION

Signature of individual signing on behalf of debtor

JOSEPH MAQUEDA CARRION

Printed name

President

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **ARVADA CORPORATION**

United States Bankruptcy Court for the: **DISTRICT OF PUERTO RICO**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☒ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☐ Yes. Fill in all of the information below.

Fill in this information to identify the case:

Debtor name **ARVADA CORPORATION**

United States Bankruptcy Court for the: **DISTRICT OF PUERTO RICO**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	<p>Priority creditor's name and mailing address</p> <p>PR DEPARTMENT OF TREASURY BANKRUPTCY SECTION (424-B) PO BOX 9024140 SAN JUAN, PR 00902-4140</p> <p>Date or dates debt was incurred</p> <p>2021</p> <p>Last 4 digits of account number 3238</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>IVU Tax Principal, interests, surcharges & penalties</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$16,852.22</p> <p>\$12,197.42</p>

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	<p>Nonpriority creditor's name and mailing address</p> <p>ALTAGRACIA TINA MIRANDA MD 1000 NW 5TH STREET SUITE 1000 MIAMI, FL 33128</p> <p>Date(s) debt was incurred 2020</p> <p>Last 4 digits of account number _</p>	<p>\$20,000.00</p>
3.2	<p>Nonpriority creditor's name and mailing address</p> <p>ANTILLEAN ADVENTIST UNIVERSITY C/O MS MYRNA COLON, PRESIDENT PO BOX 118 MAYAGUEZ, PR 00681</p> <p>Date(s) debt was incurred 9/27/2021</p> <p>Last 4 digits of account number _</p>	<p>\$305,000.00</p>

Debtor Name	Case number (if known)
ARVADA CORPORATION	
<p>3.3 Nonpriority creditor's name and mailing address BORIQUEN D/B/A BUCANERO BBQ C/O ORLANDO LUGO CARR 3 KM 79.5 BO RIO ABAJO HUMACAO, PR 00791 Date(s) debt was incurred <u>2021</u> Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,000.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.4 Nonpriority creditor's name and mailing address C.C. KRUGER ASSOCIATES CORP CALLE MEXICO #4 EDIF AREY SUITE 500 JAN JUAN, PR 00917 Date(s) debt was incurred <u>2023</u> Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$75,000.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Equipment sale</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.5 Nonpriority creditor's name and mailing address CARLOS J CRESPO MASSA d/b/a I-BIKE URB CONDADO MODERNO 114 CALLE JAZMIN CAGUAS, PR 00725 Date(s) debt was incurred <u>2/25/2019</u> Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$66,063.75</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Unfinished project claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.6 Nonpriority creditor's name and mailing address DAVID HARGETT 32776 SKYLARK DR LAKE ELSINORE, CA 92530 Date(s) debt was incurred <u>2021</u> Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$80,000.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Unfinished project claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.7 Nonpriority creditor's name and mailing address GONZALEZ SANITECH / TRANSPORTE GONZALEZ PO BOX 7476 MAYAGUEZ, PR 00681 Date(s) debt was incurred <u>2020 - 2023</u> Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,500.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Maintenance services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.8 Nonpriority creditor's name and mailing address IPFS CORPORATION 250 AVE MUNOZ RIVERA SUITE 1118 SAN JUAN, PR 00918-1816 Date(s) debt was incurred <u>2024</u> Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,500.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Insurance Premiums (Popular Auto)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.9 Nonpriority creditor's name and mailing address JOSE MENDEZ d/b/a EMANUEL TRUCK RR #7 BOX 8287 SAN JUAN, PR 00926 Date(s) debt was incurred <u>2023</u> Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$50,000.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Commissions claimed</u> <u>Debtor admits \$0 debt.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor	Name	Case number (if known)	
	ARVADA CORPORATION		
3.10	Nonpriority creditor's name and mailing address KARLA AYUSO URB LAS MERCEDES F-152 CALLE 6 LAS PIEDRAS, PR 00771 Date(s) debt was incurred <u>2023</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unfinished project claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,000.00
3.11	Nonpriority creditor's name and mailing address NATHAN ALLEN BO CANOVANILLAS CARR 857 KM 2.5 CAROLINA, PR 00985 Date(s) debt was incurred <u>2022</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unfinished project claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$107,564.90
3.12	Nonpriority creditor's name and mailing address POPULAR AUTO PO BOX 15011 SAN JUAN, PR 00902-8511 Date(s) debt was incurred <u>9/24/2020</u> Last 4 digits of account number <u>6061</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Leasing Contract (2020 Honda Passport)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32,833.54
3.13	Nonpriority creditor's name and mailing address PUERTO RICO SCIENCE, TECHNOLOGY AND RESEARCH TRUST PO BOX 363475 SAN JUAN, PR 00936-3475 Date(s) debt was incurred <u>8/13/2020</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$27,500.00
3.14	Nonpriority creditor's name and mailing address TRANSPORTE ROSARIO INC HC 05 BOX 52159 CAGUAS, PR 00725 Date(s) debt was incurred <u>2023</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Container delivery claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,500.00
3.15	Nonpriority creditor's name and mailing address US SMALL BUSINESS ADMINISTRATION DISASTER LOAN SERVICING CENTER 1545 HAWKINS BLVD SUITE 202 EL PASO, TX 79925 Date(s) debt was incurred <u>5/25/2020</u> Last 4 digits of account number <u>7809</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Disaster Assistance Loan (Disaster COVID-19 Economic Injury)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$91,500.00

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any

Debtor	ARVADA CORPORATION	Case number (if known)	
	Name		
	Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	CESAR CORDERO CALLE MEXICO #4 EDIF AREY SUITE 500 SAN JUAN, PR 00917	Line <u>3.4</u> <input type="checkbox"/> Not listed. Explain _____	—
4.2	CESC - COVID EIDL SERVICE CENTER 14925 KINGSPOET RD FORT WORTH, TX 76166	Line <u>3.15</u> <input type="checkbox"/> Not listed. Explain _____	—
4.3	DEPARTMENT OF JUSTICE FEDERAL LITIGATION DIVISION PO BOX 9020192 SAN JUAN, PR 00902-0192	Line <u>2.1</u> <input type="checkbox"/> Not listed. Explain _____	—
4.4	JOSE RAFAEL MILAN NEGRON ESQ. JOSE RAFAEL MILAN MUNIZ ESQ PO BOX 544 SABANA GRANDE, PR 00637	Line <u>3.2</u> <input type="checkbox"/> Not listed. Explain _____	—
4.5	MARIA ANGELINA CINTRON PASTRANA ESQ 283 AVE WINSTON CHURCHILL EL SENORIAL SAN JUAN, PR 00926	Line <u>3.9</u> <input type="checkbox"/> Not listed. Explain _____	—
4.6	US ATTORNEY OFFICE TORRE CHARDON-SUITE 1201 350 CARLOS CHARDLON ST SAN JUAN, PR 00918	Line <u>3.15</u> <input type="checkbox"/> Not listed. Explain _____	—
4.7	US SMALL BUSINESS ADMINISTRATION 273 PONCE DE LEON AVE SUITE 510 PLAZA 273 SAN JUAN, PR 00917-1930	Line <u>3.15</u> <input type="checkbox"/> Not listed. Explain _____	—

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ <u>16,852.22</u>
5b. +	\$ <u>884,962.19</u>
5c.	\$ <u>901,814.41</u>

B2030 (Form 2030) (12/15)

**United States Bankruptcy Court
District of Puerto Rico**

In re **ARVADA CORPORATION**

Debtor(s)

Case No.

Chapter

7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
- | | | |
|---|----|-----------------|
| For legal services, I have agreed to accept | \$ | 3,000.00 |
| Prior to the filing of this statement I have received | \$ | 3,000.00 |
| Balance Due | \$ | 0.00 |
2. The source of the compensation paid to me was:
- ☐ Debtor ☒ Other (specify): **President**
3. The source of compensation to be paid to me is:
- ☒ Debtor ☐ Other (specify):
4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
- ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - [Other provisions as needed]
Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.
6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:
Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

February 9, 2024

Date

/s/ JUAN A SANTOS BERRIOS

JUAN A SANTOS BERRIOS

Signature of Attorney

Santos-Berrios Law Offices, LLC

PO Box 9102

Humacao, PR 00792-9102

787-285-1001 Fax: 787-285-8358

santosberriosbk@gmail.com

Name of law firm

**United States Bankruptcy Court
District of Puerto Rico**

In re **ARVADA CORPORATION** Debtor(s) Case No. _____
Chapter **7**

VERIFICATION OF CREDITOR MATRIX

I, the President of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **February 9, 2024** **/s/ JOSEPH MAQUEDA CARRION**
JOSEPH MAQUEDA CARRION/President
Signer/Title

ARVADA CORPORATION
PMB 154
295 PALMAS INN WAY STE 130
HUMACAO, PR 00791

DAVID HARGETT
32776 SKYLARK DR
LAKE ELSINORE, CA 92530

POPULAR AUTO
PO BOX 15011
SAN JUAN, PR 00902-8511

JUAN A SANTOS BERRIOS
SANTOS-BERRIOS LAW OFFICES, LLC
PO BOX 9102
HUMACAO, PR 00792-9102

DEPARTMENT OF JUSTICE
FEDERAL LITIGATION DIVISION
PO BOX 9020192
SAN JUAN, PR 00902-0192

PR DEPARTMENT OF TREASURY
BANKRUPTCY SECTION (424-B)
PO BOX 9024140
SAN JUAN, PR 00902-4140

ALTAGRACIA TINA MIRANDA MD
1000 NW 5TH STREET SUITE 1000
MIAMI, FL 33128

GONZALEZ SANITECH / TRANSPORTE
PO BOX 7476
MAYAGUEZ, PR 00681

BONZAI BIO SCIENCE, TECHN
AND RESEARCH TRUST
PO BOX 363475
SAN JUAN, PR 00936-3475

ANTILLEAN ADVENTIST UNIVERSITY
C/O MS MYRNA COLON, PRESIDENT
PO BOX 118
MAYAGUEZ, PR 00681

IPFS CORPORATION
250 AVE MUNOZ RIVERA SUITE 1118
SAN JUAN, PR 00918-1816

TRANSPORTE ROSARIO INC
HC 05 BOX 52159
CAGUAS, PR 00725

BORIQUEN D/B/A BUCANERO BBQ
C/O ORLANDO LUGO
CARR 3 KM 79.5 BO RIO ABAJO
HUMACAO, PR 00791

JOSE MENDEZ D/B/A EMANUEL TRUCKS ATTORNEY OFFICE
RR #7 BOX 8287
SAN JUAN, PR 00926
TORRE CHARDON-SUITE 1201
350 CARLOS CHARDLON ST
SAN JUAN, PR 00918

C.C. KRUGER ASSOCIATES CORP
CALLE MEXICO #4
EDIF AREY SUITE 500
SAN JUAN, PR 00917

JOSE RAFAEL MILAN NEGRON ESQ.
JOSE RAFAEL MILAN MUNIZ ESQ
PO BOX 544
SABANA GRANDE, PR 00637

US SMALL BUSINESS ADMINIST
DISASTER LOAN SERVICING CEN
1545 HAWKINS BLVD SUITE 202
EL PASO, TX 79925

CARLOS J CRESPO MASSA D/B/A I-BIKE
URB CONDADO MODERNO
114 CALLE JAZMIN
CAGUAS, PR 00725

KARLA AYUSO
URB LAS MERCEDES
F-152 CALLE 6
LAS PIEDRAS, PR 00771

US SMALL BUSINESS ADMINIST
273 PONCE DE LEON AVE SUITE 51
PLAZA 273
SAN JUAN, PR 00917-1930

CESAR CORDERO
CALLE MEXICO #4
EDIF AREY SUITE 500
SAN JUAN, PR 00917

MARIA ANGELINA CINTRON PASTRANA ESQ
283 AVE WINSTON CHURCHILL
EL SENORIAL
SAN JUAN, PR 00926

CESC - COVID EIDL SERVICE CENTER
14925 KINGSPORT RD
FORT WORTH, TX 76166

NATHAN ALLEN
BO CANOVANILLAS
CARR 857 KM 2.5
CAROLINA, PR 00985

**United States Bankruptcy Court
District of Puerto Rico**

In re **ARVADA CORPORATION**

Debtor(s)

Case No.

Chapter

7

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **ARVADA CORPORATION** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☒ None [*Check if applicable*]

February 9, 2024

Date

/s/ JUAN A SANTOS BERRIOS

JUAN A SANTOS BERRIOS

Signature of Attorney or Litigant

Counsel for **ARVADA CORPORATION**

Santos-Berrios Law Offices, LLC

PO Box 9102

Humacao, PR 00792-9102

787-285-1001 Fax:787-285-8358

santosberriosbk@gmail.com